Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Wyden For Senate 1220 SW Morrison St ADDRESS (number and street) (Check if address Ste 910 is changed) Portland OR 97205 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS jocelyn@wyden.net (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.standtallforamerica.com (Check if address is changed) DATE 2022 C00308676 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Michels, F. Stephen, , , Type or Print Name of Treasurer Michels, F. Stephen, , , [Electronically Filed] 07 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

E	C Form 1 (Revised 03/2022)	Page 2
	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the can information below.)	didate
	Name of Candidate Wyden, Ron, L, ,	
	Party Affiliation DEM Sought: House Senate President	State OR strict
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican, etc.)	Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected org	anization is a:
	Corporation Corporation w/o Capital Stock Labor Organization	zation
	Membership Organization Trade Association Cooperative	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated function committee. (i.e., nonconnected committee)	d or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	(g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mor committees/organizations, at least one of which is an authorized committee of a federal candidate.	e political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mor committees/organizations, none of which is an authorized committee of a federal candidate.	e political
	Committees Participating in Joint Fundraiser	
	1	

	FEC Form 1	1 (Revised 02/2009)	Page <b>3</b>
٧	/rite or Type Comm	mittee Name	
	Wyden F	For Senate	
6.	Name of Any Co	onnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Sponsor
	Mailing Address	PO Box 3271	
		Portland OR 97208	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship:	Connected Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
:	Custodian of Record	cords: Identify by name, address (phone number optional) and position of the person in posses ds.	sion of committee
		Tyree, Jocelyn, , ,	
	Full Name		
	Mailing Address	8935 SW Bellflower St	
		Tigard OR 97224	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position	▼	
	Assistant Treasure	rer Telephone number	708   -   1059
3.		he name and address (phone number optional) of the treasurer of the committee; and the nagent (e.g., assistant treasurer).	ame and address of
	Full Name	Michels, F. Stephen, , ,	
	of Treasurer		
	Mailing Address	1924 SW Palatine St	
		Portland OR 97219	
	Tille on De 191	CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	892 - 9507

	FEC Form 1	(Revised 02/2009)	Page <b>4</b>
	Name of ignated	Tyree, Jocelyn, , ,	
Maili	ing Address	8935 SW Beliflower St	
		Tigard OR 9722	4
Title	or Position	CITY ▲ STATE ▲	ZIP CODE ▲
	sistant Treasu		708 - 1059
		<b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds.	olds accounts, rents
Nam	e of Bank, D	Depository, etc.	
		Bank of America	
Mailii	ng Address	PO Box 15284	
		Wilmington DE 19850	)
		CITY ▲ STATE ▲	ZIP CODE ▲
Nam	e of Bank, D	Depository, etc.	
Maili	ng Address		
		CITY ▲ STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected Oregon Victory F	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
Mailing Address	1220 SW Morrison St		
	Ste 910		
	Portland	OR	97205
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Represent	ative Leadership PAC Spo
Connecte	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identif	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identif	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identif	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identif	Affiliated Committee   y Join  y by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Spo
Connecte  Designated Agent: Identification  Full Name  Mailing Address	Affiliated Committee  y Join  y by name, address (phone number – optional)  CITY		
Connecte  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  y Join  y by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
Connected  Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposites Safety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Committee  y Join  y by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_

5(g)	or(h). <b>Joint Fundraisin</b>	Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected Progress 2022 Vid	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	600 Pennsylvania Ave SE #15180		
		Washington	DC	20003
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee Solution Joint	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name Mailing Address  TITLE OR POSITION	CITY A	STATE A ephone Number	ZIP CODE A
9.	Full Name Mailing Address  TITLE OR POSITION	CITY   CITY   Tel  ies: List all banks or other depositories in which tentains funds.	ephone Number	
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or matching and the pository, etc.	CITY   CITY   Tel  ies: List all banks or other depositories in which tentains funds.	ephone Number	s funds, holds accounts, rents
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank,	CITY   CITY   Tel  ies: List all banks or other depositories in which tentains funds.	ephone Number	s funds, holds accounts, rents

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
	l Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
Bennet Wyden V	ictory Fund		
Mailing Address	600 Pennsylvania Ave SE #15180		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
riolationomp.			
Connecte		undraising Representa	ative Leadership PAC Spon
Designated Agent: Identification Full Name	ed Organization Affiliated Committee	undraising Representa	ative Leadership PAC Spons
Connecte  Designated Agent: Identif	ed Organization Affiliated Committee	undraising Representa	Leadership PAC Spons
Designated Agent: Identification Full Name	ed Organization Affiliated Committee	undraising Representa	Leadership PAC Spons
Designated Agent: Identification  Full Name Mailing Address	Affiliated Committee Joint F  fy by name, address (phone number – optional)	STATE	Leadership PAC Spons
Designated Agent: Identification Full Name	Affiliated Committee  Joint F  fy by name, address (phone number – optional)  CITY		
Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or many Name of Bank,	Affiliated Committee  Affiliated Committee  Figure 1	STATE A	ZIP CODE A
Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or many Name of Bank, Depository, etc.	Affiliated Committee  Affiliated Committee  Figure 1	STATE A	ZIP CODE A
Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or many Name of Bank,	Affiliated Committee  Affiliated Committee  Figure 1	STATE A	ZIP CODE A
Designated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or many Name of Bank, Depository, etc.	Affiliated Committee  Affiliated Committee  Figure 1	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_

h). <b>Joint Fundraisi</b>		FEC ID number	C
		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		T LO ID Humber	0
ame of Any Connected	I Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
BLUE SENATE 2	2022		
Mailing Address	600 Pennsylvania Ave SE #15180		
Mailing / Idai occ			
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee 🔀 Joint	t Fundraising Representa	ative Leadership PAC S
	Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or (l	n). <b>Joint Fundraisin</b>	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6. <b>N</b> a		Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Nevada Oregon V	ictory 2022		1 1 1 1 1 1 1 1 1 1
	Mailing Address	611 Pennsylvania Ave SE		
	Mailing Address	Num 143		
		Washington	, DC	, 20003
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
			Fundraising Representa	
	Connected	Allillated Committee Committee	rundraising riepresend	Leadership 1 AC Oponsor
_				
8. <b>D</b> e	esignated Agent: Identify	by name, address (phone number – optional)		
8. <b>D</b> e		by name, address (phone number – optional)		
—8. <b>D</b> e	Full Name	by name, address (phone number – optional)		
		by name, address (phone number – optional)		
— 8. <b>D</b> €	Full Name	by name, address (phone number – optional)		
— 8. <b>D</b> e	Full Name			
— 8. <b>D</b> €	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name	CITY A	STATE A	
8. <b>D</b> e	Full Name	CITY A	1	
— Э. <b>В</b> а	Full Name Mailing Address  TITLE OR POSITION	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
—— 9. <b>B</b> 8	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
——9. <b>B</b> å	Full Name  Mailing Address  TITLE OR POSITION	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
——9. <b>B</b> å	Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or main arme of Bank,	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
——9. <b>B</b> å	Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦
——9. <b>B</b> å	Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE 🛦